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Attorney Docket Number HYG012US

PTO/SB/01 (12-97)
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## **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

☑ Declaration Submitted with Initial Filing

Declaration OR . Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

First Named Inventor	Kia Silverbrook				
COMPLETE IF KNOWN					
Application Number	/				
Filing Date					
Group Art Unit					
Examiner Name					

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Shopping Receptacle with In-Built Scanner								
the specification of which (Title of the Invention)								
is attached here	to							
was filed on (MM	/DD/YYYY)	as Unite	d States Applica	tion Number or F	PCT International			
Application Number	and v	vas amended on (MM/DD/Y	m		(if applicable).			
I hereby state that I have	reviewed and understand the nent specifically referred to ab	contents of the above iden	tified specificatio	n, including the o	daims, as			
	disclose information which is		defined in 37 CF	ED 1 56				
Tacknowledge the duty to	disclose information which is	material to pateritability as	delined in 57 of	1.30.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Applicatio Number(s)	n Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co YES	ppy Attached?			
2003901617 2003901795	7 Australia April 7, 2003 🗆 🗔 🛣							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s) Filing Date (MM/DD/YYYY)								
			numbe supple	onal provisiona ers are listed o emental priority SB/02B attache	n a / data sheet			

[Page 1 of 2]
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DEC	LA	RATIO	<u></u>	- Othity	<u>y 01  </u>	Desig	II Fall	#11L /	<u> 441-</u>	nicatic	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.											
U.	S. Pare	nt Applicati		PCT Parent	t		Filing Date	1		nt Patent N	
		Numb	er			(MM/	D/YYYY)	+-		(if applicab	le)
		CT international									
As a named inv and Trademark	entor, I h	ereby appoint the innected therewit	th: 🔲	ng registered po Customer Num <i>OR</i> Registered pra	nber			<del></del>	•	ect all business i Place Custo Number Bar Label hei	omer Code
	Nam	•		Regis	tration	Tiame/regist	Na				stration
	Name Number Name Number										
Additional:	registered	practitioner(s) r	amed o	n supplementa	l Registere	Practitione	r Information si	neet PTO	/SB/020	C attached here	to.
Direct all com	Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  Direct all correspondence to:   Customer Number or Bar Code Label  24011  OR  Correspondence address below										
Name	Kia S	Silverbrook									
Address	Silve	rbrook Rese	earch	Pty Ltd							
Address	393	Darling Stre	et								
City	Balm	ain		•		State	NSW	ZIP	204	1	
Country	Austr	ralia		Telepho	ne 61-2	-9818-66	33	Fax	61-	2-9555-77 <del>6</del>	32
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of S	ole or F	First Invento	r:			☐ A pet	ition has bee	n filed fo	r this (	unsigned inve	entor
G	Given Name (first and middle [if any]) Family Name or Surname										
	KIA SILVERBROOK										
Inventor's Signature		Date   March 30   2004					March 30, 2004				
Residence:	City	Balmain State NSW Country Australia Citizenship Australia					Australian				
Post Office A	Post Office Address 393 Darling Street										
Post Office A	Post Office Address										
City		Balmain	State	NSW	ZIP	2041		Cou	entry	Australi	а
Additiona	l invento	rs are being n	amed c	on thesu	pplement	al Addition	al Inventor(s)	sheet(s	) PTO	/SB/02A attac	hed hereto

## HYG012US

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## **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet
Page 1\_\_ of \_\_\_ 1

MINISTER CO.	The second section of the							
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Family Name or Sumame					umame			
PAUL C LAPSTUN								
Inventor's Signature					Date March 30, 2004			
Residence: City Balmain	ty Balmain State NSW Country Australia				Citizenship Norwegian			
Mailing Address 393 Darling Street								
Mailing Address								
City Balmain	State NS	w	ZIP 2041	Countr	y Australia			
Name of Additional Joint Inventor, if ar	ıy:		A petition has been file	ed for this	s unsigned inventor			
Given Name (first and middle [if any]	)		Family Na	me or S	e or Surname			
Inventor' s Signature				•	Date			
Residence: City	State	Country			Citizenship			
Mailing Address								
Mailing Address								
City	State		ZIP	Cou	ntry			
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any]) Family Name or Surname					or Surname			
Inventor's Signature Date								
Residence: City State			Country	Citizenship				
Mailing Address								
Mailing Address								
City	State		ZIP	C	ountry			

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